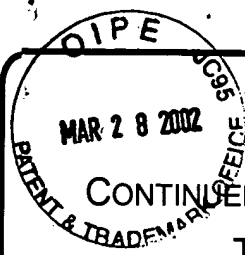


RCE/2800

PTO/SB/30(10-01)

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REQUEST

FOR

CONTINUED EXAMINATION (RCE)

TRANSMITTAL

Address to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	09/317,536
Filing Date	05/24/99 #21/RCE
First Named Inventor	Zhao 4-18-2
Art Unit	2811
Examiner Name	Owens, Douglas W. <i>gules</i>
Attorney Docket Number	050324-1170

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 C.F.R. 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. §1.114

- a. ☒ Previously submitted
- i. ☒ Consider the amendment(s)/(reply under 37 CFR §1.116 previously filed on 01/23/02).
(Any unentered amendment(s) referred to above will be entered)
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
- iii. ☐ Other:

- b. ☒ Enclosed

- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other:

2. Miscellaneous

- a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 C.F.R. §1.17(i) required).

- b. ☐ Other:

04/02/2002 SLUANG1 00000007 Fees 09317536 The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R. 1.114 when the RCE is filed.

01 FC 179 740.00 CH

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 20-0778.
- i. ☒ RCE fee required under 37 C.F.R. §1.17(e)
- ii. ☒ Extension of time fee (37 C.F.R. §1.136 and 1.17)
- iii. ☐ Other:

- b. ☐ Check in the amount of \$ enclosed

- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print Type)	Sami O. Malas	Registration No. (Attorney/Agent)	44,893
Signature	<i>Sami Malas</i>	Date	03-19-02

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, D.C. 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	Mary N. Kilgore
Signature	<i>Mary N. Kilgore</i>
Date	03-19-02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark office, Washington, D.C. 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. Send Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, D.C. 20231.